

REDRESSAL OF GRIEVANCES OF OBC EMPLOYEES AT AIIMS Patna.

FORMAT FOR COMPLAINT

1. Name of the *complainant / aggrieved person* :
- a) Designation with Employee ID :
- b) Department :
- c) Mobile Number :
- d) Email ID :
2. Caste (OBC) :
3. Date of joining in this Institute :
4. Nature of the Complaint (in brief) :
5. Place & Date of Incident (if applicable) :
6. Documents / Evidence / Proof
Should accompany :

Name :
Signature with date :
Designation :
Department :